

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 25, 2003 8:00 am**  
**Secretary of State**

04-25-2003 90161 002 \*\*\*150.00

04/7925 AV

**DOCUMENT # P99000101208**

1. Entity Name  
**HARRY B. KNIGHTS, INC.**



Principal Place of Business  
**3820 GULF BOULEVARD, #208**  
**ST. PETE BEACH FL 33706**

Mailing Address  
**3820 GULF BOULEVARD, #208**  
**ST. PETE BEACH FL 33706**



2. Principal Place of Business  
**new 6363 99th Way N. 12A**

3. Mailing Address  
**ST. PETE FL. 33708**

Suite, Apt. #, etc.  
**12A**

Suite, Apt. #, etc.  
**SAFARI**

City & State  
**St. Petersburg FL**

City & State  
**SAFARI**

Zip  
**33705**

Country  
**PINELLAS**

Zip

Country

4. FEI Number  
**59-3604011**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KNIGHTS, HARRY B III**  
**3820 GULF BOULEVARD, #208**  
**ST. PETE BEACH FL 33706**



**Mr. & Mrs. Harry Knights**  
**6363 99th Way N**  
**St. Petersburg, FL 33708-4530**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent.

SIGNATURE *Harry B. Knights*  
Signature, typed or printed name of registered agent and title if applicable.

**4/10/03**  
(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD**  
**KNIGHTS, HARRY B III**  
**3820 GULF BOULEVARD, #208**  
**ST. PETE BEACH FL 33706**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
**Mr. & Mrs. Harry Knights**  
**6363 99th Way N**  
**St. Petersburg, FL 33708-4530**  
**12A**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VSD**  
**KNIGHTS, CHRISTINE A**  
**3820 GULF BOULEVARD, #208**  
**ST. PETE BEACH FL 33706**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
**Mr. & Mrs. Harry Knights**  
**6363 99th Way N**  
**St. Petersburg, FL 33708-4530**  
**12A**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Harry B. Knights*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**4/10/03**  
Date  
**397 5244**  
Daytime Phone #

CR2E034 (10/02)